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## BIB DATA SHEET

CONFIRMATION NO. 7251

<b>SERIAL NUMBER</b> 10/697,410	<b>FILING or 371(c) DATE</b> 10/30/2003 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b> 339693US28		
<b>APPLICANTS</b> G. Michael Higgins, Fort Wayne, IN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/28/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KRISTINE K RAPILLO/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWINGS</b> 36	<b>TOTAL CLAIMS</b> 46	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, L.L.P. 1940 DUKE STREET ALEXANDRIA, VA 22314 UNITED STATES						
<b>TITLE</b> Automated system and method for evaluating insurable risks at point of sale						
<b>FILING FEE RECEIVED</b> 1610	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			